

CAPI

Payment Standards

CAPI – Payment Standards (Effective January 1, 2000-December 31, 2000)

	Independent Living			Reduced Needs			Non-Medical Out-of-Home Care					
	Residing in Own Household			Household of Another with In-Kind Room & Board			Household of Relative with In-Kind Room & Board and Certified NMOHC			In Licensed Facility or Household of Relative without In-Kind Room & Board		
	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP
Individual												
AGED or DISABLED	682.00		692.00	519.00		529.00	669.00		679.00	837.00		847.00
- without cooking facilities (RMA) 1/	755.00		765.00	N/A		N/A	N/A		N/A	N/A		N/A
BLIND	739.00		749.00	589.00		499.00	669.00		679.00	679.00		847.00
DISABLED MINOR												
- living with parent(s)	583.00		593.00	411.00		421.00						
- living with nonparent relative or non-relative guardian	583.00		593.00	411.00		421.00	669.00		679.00	837.00		847.00
	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP
- Couple												
- AGED or DISABLED												
- per couple	1,209.00	1,219.00	1,229.00	986.00	996.00	1,006.00	1,376.00	1,396.00	1,396.00	1,674.00	1,684.00	1,694.00
- without cooking facilities (RMA) 1/	1,355.00	1,355.00	1,375.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BLIND	1,404.00	1,414.00	1,424.00	1,182.00	1,192.00	1,202.00	1,376.00	1,396.00	1,674.00	1,674.00	1,684.00	1,694.00
- per couple												
BLIND/AGED OR DISABLED												
- per couple	1,331.00	1,341.00	1,351.00	1,108.00	1,118.00	1,128.00	1,376.00	1,396.00	1,674.00	1,674.00	1,684.00	1,694.00

1/ RMA—Restaurant Meals Allowance - \$3 Individual; \$146 Couple

Title XIX Medical Facility		
	Individual	Couple
Total CAPI	\$34	\$68
SSI/SSP	44	88

(All-County Information Notice No. 1-86-99)

CAPI

Payment Standards

CAPI – Payment Standards (Effective January 1, 2001)												
	Independent Living			Reduced Needs			Non-Medical Out-of-Home Care					
	Residing in Own Household			Household of Another with In-Kind Room & Board			Household of Relative with In-Kind Room & Board and Certified NMOHC			In Licensed Facility or Household of Relative without In-Kind Room & Board		
	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP	Total CAPI		Total SSI/SSP
Individual												
AGED or DISABLED	702.00		712.00	535.00		545.00	689.00		699.00	862.00		872.00
- without cooking facilities (RMA) 1/	777.00		787.00	N/A		N/A	N/A		N/A	N/A		N/A
BLIND	761.00		771.00	607.00		617.00	689.00		699.00	862.00		872.00
DISABLED MINOR												
- living with parent(s)	601.00		611.00	423.00		433.00						
- living with nonparent relative or non-relative guardian	601.00		611.00	423.00		433.00	689.00		699.00	862.00		872.00
	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP	BOTH CAPI	ONE CAPI, ONE SSI	BOTH SSI/SSP
- Couple												
- AGED or DISABLED												
- per couple	1,245.00	1,255.00	1,265.00	1,016.00	1,026.00	1,036.00	1,417.00	1,427.00	1,437.00	1,724.00	1,734.00	1,744.00
- without cooking facilities (RMA) 1/	1,395.00	1,405.00	1,415.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BLIND	1,446.00	1,456.00	1,466.00	1,218.00	1,228.00	1,238.00	1,417.00	1,427.00	1,437.00	1,724.00	1,734.00	1,744.00
- per couple												
BLIND/AGED OR DISABLED												
- per couple	1,371.00	1,381.00	1,391.00	1,141.00	1,151.00	1,161.00	1,417.00	1,427.00	1,437.00	1,724.00	1,734.00	1,744.00

1/ RMA—Restaurant Meals Allowance - \$75 Individual; \$150 Couple

Title XIX Medical Facility		
	Individual	Couple
Total CAPI	\$35	\$70
SSI/SSP	45	90

(All-County Information Notice No. 1-119-00, December 1, 2000)